

For Six Month Period Ending JUN - 1
(Insert date)

I - REGISTRANT

1. (a) Name of Registrant (b) Registration No. 3028
Dickstein Shapiro Morin & Oshinsky, LLP
(c) Business Address(es) of Registrant
2101 L Street, N.W.
Washington, D.C. 20037

2. Has there been a change in the information previously furnished in connection with the following:

- (a) If an individual:
- | | | |
|-----------------------|------------------------------|-----------------------------|
| (1) Residence address | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (2) Citizenship | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (3) Occupation | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
- (b) If an organization:
- | | | |
|--------------------------|------------------------------|--|
| (1) Name | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| (2) Ownership or control | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| (3) Branch offices | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
- (c) Explain fully all changes, if any, indicated in items (a) and (b) above.

IF THE REGISTRANT IS AN INDIVIDUAL, OMIT RESPONSE TO ITEMS 3, 4, AND 5(a).

3. If you have previously filed Exhibit C¹, state whether any changes therein have occurred during this 6 month reporting period.
Yes ☐ No ☒

If yes, have you filed an amendment to the Exhibit C? Yes ☐ No ☐

If no, please attach the required amendment.

¹ The Exhibit C, for which no printed form is provided, consists of a true copy of the charter, articles of incorporation, association, and by laws of a registrant that is an organization. (a waiver of the requirement to file an Exhibit C may be obtained for good cause upon written application to the Assistant Attorney General, Criminal Division, Internal Security Section, U.S. Department of Justice, Washington, D.C. 20530.)

4. (a) Have any persons ceased acting as partners, officers, directors or similar officials of the registrant during this 6 month reporting period? Yes ☒ No ☐

If yes, furnish the following information:

Name	Position	Date Connection Ended
John W. Griffin	Partner	12/31/97
Seymour Glanzer	Partner	1/1/98
Sidney Dickstein	Partner	1/1/98

- (b) Have any persons become partners, officers, directors or similar officials during this 6 month reporting period? Yes ☒ No ☐

If yes, furnish the following information:

Name	Residence Address	Citizenship	Position	Date Assumed
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See Attachment No. 1

5. (a) Has any person named in item 4(b) rendered services directly in furtherance of the interests of any foreign principal? Yes ☐ No ☒

If yes, identify each such person and describe his service.

- (b) Have any employee or individuals, who have filed a short form registration statement, terminated their employment or connection with the registrant during this 6 month reporting? Yes ☐ No ☒

If yes, furnish the following information:

Name	Position or connection	Date terminated
------	------------------------	-----------------

- (c) During this six month reporting period, has the registrant hired as employees or in any other capacity, any persons who rendered or will render services to the registrant directly in furtherance of the interests of any foreign principal(s) in other than a clerical or secretarial, or in a related or similar capacity? Yes ☐ No ☒

If yes, furnish the following information:

Name	Residence Address	Citizenship	Position	Date Assumed
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6. Have short form registration statements been filed by all of the persons named in Items 5(a) and 5(c) of the supplemental statement? Yes ☒ No ☐

If no, list names of persons who have not filed the required statement.

II - FOREIGN PRINCIPAL

7. Has your connection with any foreign principal ended during this 6 month reporting period?

Yes ☐No ☒

If yes, furnish the following information:

Name of foreign principal

Date of termination

n/a

8. Have you acquired any new foreign principal² during this 6 month reporting period?

Yes ☐No ☒

If yes, furnish following information:

Name and address of foreign principal

Date acquired

n/a

9. In addition to those named in Items 7 and 8, if any, list foreign principals² whom you continued to represent during the 6 month reporting period.

Malaysian Palm Oil Council of America

Middle East Airlines

Kuwait Airways

Royal Thai Embassy - Office of Commercial Affairs

10. EXHIBITS A AND B n/a

(a) Have you filed for each of the newly acquired foreign principals in Item 8 the following:

Exhibit A³

Yes ☐No ☐

Exhibit B⁴

Yes ☐No ☐

If no, please attach the required exhibit.

(b) Have there been any changes in the Exhibits A and B previously filed for any foreign principal whom you represented during this six month period?

Yes ☐No ☐

If yes, have you filed an amendment to these exhibits?

Yes ☐No ☐

If no, please attach the required amendment.

² The term "foreign principal" includes, in addition to those defined in section 1(b) of the Act, an individual organization any of whose activities are directly or indirectly supervised, directed, controlled, financed, or subsidized in whole or in major part by a foreign government, foreign political party, foreign organization or foreign individual. (See Rule 100(a) (9)). A registrant who represents more than one foreign principal is required to list in the statements he files under the Act only those principals for whom he is not entitled to claim exemption under Section 3 of the Act. (See Rule 208.)

³ The Exhibit A, which is filed on form CRM-157 (Formerly OBD-67) sets forth the information required to be disclosed concerning each foreign principal.

⁴ The Exhibit B, which is filed on Form CRM-155 (Formerly OBD-65) sets forth the information concerning the agreement or understanding between the registrant and the foreign principal.

III - ACTIVITIES

11. During this 6 month reporting period, have you engaged in any activities for or rendered any services to any foreign principal named in Items 7, 8, and 9 of this statement? Yes ☒ No ☐

If yes, identify each such foreign principal and describe in full detail your activities and services:

See Attachment No. 2

12. During this 6 month reporting period, have you on behalf of any foreign principal engaged in political activity⁵ as defined below? Yes ☐ No ☒

If yes, identify each such foreign principal and describe in full detail all such political activity, indicating, among other things, the relations, interests and policies sought to be influenced and the means employed to achieve this purpose. If the registrant arranged, sponsored or delivered speeches, lectures or radio and TV broadcasts, give details as to dates, places, of delivery, names of speakers and subject matter.

n/a

13. In addition to the above described activities, if any, have you engaged in activity on your own behalf which benefits any or all of your foreign principals? Yes ☐ No ☒

If yes, describe fully.

n/a

⁵ The term "political activities" means any activity that the person engaging in believes will, or that the person intends to, in any way influence any agency or official of the Government of the United States or any section of the public within the United States with reference to formulating, adopting or changing the domestic or foreign policies of the United States or with reference to political or public interests, policies, or relations of a government, a foreign country or a foreign political party.

IV - FINANCIAL INFORMATION

14. (a) RECEIPTS-MONIES

During this 6 month reporting period, have you received from any foreign principal named in Items 7, 8, and 9 of this statement, or from any other source, for or in the interests of any such foreign principal, any contributions, income or money either as compensation or otherwise? Yes ☒ No ☐

If no, explain why.

If yes, set forth below in the required detail and separately for each foreign principal an account of such monies⁶

Date	From Whom	Purpose	Amount
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See Attachment No. 3

40,309.91
Total

(b) RECEIPTS - FUND RAISING CAMPAIGN

During this 6 month reporting period, have you received, as part of a fund raising campaign⁷, any money on behalf of any foreign principal named in items 7, 8, and 9 of this statement? Yes ☐ No ☒

If yes, have you filed an Exhibit D to your registration? Yes ☐ No ☐

If yes, indicate the date the Exhibit D was filed. Date _____

(c) RECEIPTS-THINGS OF VALUE

During this 6 month reporting period, have you received any thing of value⁹ other than money from any foreign principal named in Items 7, 8, and 9 of this statement, or from any other source, for or in the interests of any such foreign principal?

Yes ☐ No ☒

If yes, furnish the following information:

Name of foreign principal	Date received	Description of thing of value	Purpose
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^{6, 7} A registrant is required to file an Exhibit D if he collects or receives contributions, loans, money, or other things of value for a foreign principal, as part of a fund raising campaign. (See Rule 201(e).)

⁸ An Exhibit D, for which no printed form is provided, sets forth an account of money collected or received as a result of a fund raising campaign and transmitted for a foreign principal.

⁹ Things of value include but are not limited to gifts, interest free loans, expense free travel, favored stock purchases, exclusive rights, favored treatment over competitors, "kickbacks," and the like.

15. (a) **DISBURSEMENTS-MONIES**

During this 6 month reporting period, have you

(1) disbursed or expended monies in connection with activity on behalf of any foreign named in Items 7, 8, and 9 of this statement? Yes ☒ No ☐

(2) transmitted monies to any such foreign principal? Yes ☒ No ☐

If no, explain in full detail why there were no disbursements made on behalf of any foreign principal.

If yes, set forth below in the required detail and separately for each foreign principal an account of such monies, including monies transmitted, if any, to each foreign principal.

Date	To Whom	Purpose	Amount
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See Attachment No. 4

4,962.17
Total

(b) DISBURSEMENTS-THINGS OF VALUE

During this 6 month reporting period, have you disposed of anything of value¹⁰ other than money in furtherance of or in connection with activities on behalf of any foreign principal named in Items 7, 8, and 9 of this statement?

Yes ☐No ☒

If yes, furnish the following information:

Date disposed	Name of person to whom given	On behalf of what foreign principal	Description of thing of value	Purpose
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(c) DISBURSEMENTS-POLITICAL CONTRIBUTIONS

During this 6 month reporting period, have you from your own funds and on your own behalf either directly or through any other person, made any contributions of money or other things of value¹¹ in connection with an election to any political office, or in connection with any primary election, convention, or caucus held to select candidates for political office?

Yes ☒No ☐

If yes, furnish the following information:

Date	Amount or thing of value	Name of political organization	Name of candidate
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See Attachment No. 5

^{10, 11} Things of value include but are not limited to gifts, interest free loans, expense free travel, favored stock purchases, exclusive rights, favored treatment over competitors, "kickbacks" and the like.

V - INFORMATIONAL MATERIALS

16. During this 6 month reporting period, did you prepare, disseminate or cause to be disseminated any informational materials¹²?
 Yes ☐ No ☒

IF YES, RESPOND TO THE REMAINING ITEMS IN SECTION V.

17. Identify each such foreign principal.

n/a

18. During this 6 month reporting period, has any foreign principal established a budget or allocated a specified sum of money to finance your activities in preparing or disseminating informational materials? Yes ☐ No ☒

If yes, identify each such foreign principal, specify amount, and indicate for what period of time.

n/a

19. During this 6 month reporting period, did your activities in preparing, disseminating or causing the dissemination of informational materials include the use of any of the following:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Radio or TV broadcasts | <input type="checkbox"/> Magazine or newspaper articles | <input type="checkbox"/> Motion picture films | <input type="checkbox"/> Letters or telegrams |
| <input type="checkbox"/> Advertising campaigns | <input type="checkbox"/> Press releases | <input type="checkbox"/> Pamphlets or other publications | <input type="checkbox"/> Lectures or speeches |
| <input type="checkbox"/> Other (specify) _____ | | | |

20. During this 6 month reporting period, did you disseminate or cause to be disseminated informational materials among any of the following groups:

- | | | |
|--|---|---|
| <input type="checkbox"/> Public Officials | <input type="checkbox"/> Newspapers | <input type="checkbox"/> Libraries |
| <input type="checkbox"/> Legislators | <input type="checkbox"/> Editors | <input type="checkbox"/> Educational institutions |
| <input type="checkbox"/> Government agencies | <input type="checkbox"/> Civic groups or associations | <input type="checkbox"/> Nationality groups |
| <input type="checkbox"/> Other (specify) _____ | | |

21. What language was used in the informational materials:

- ☐ English ☐ Other (specify) _____

22. Did you file with the Registration Unit, U.S. Department of Justice a copy of each item of such informational materials disseminated or caused to be disseminated during this 6 month reporting period? Yes ☐ No ☐

23. Did you label each item of such informational materials with the statement required by Section 4(b) of the Act? Yes ☐ No ☐

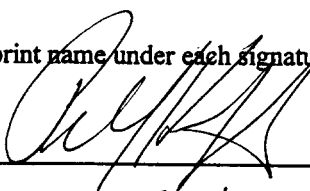
¹² The term informational materials includes any oral, visual, graphic, written, or pictorial information or matter of any kind, including that published by means of advertising, books, periodicals, newspapers, lectures, broadcasts, motion pictures, or any means or instrumentality of interstate or foreign commerce or otherwise. Informational materials disseminated by an agent of a foreign principal as part of an activity in itself exempt from registration, or an activity which by itself would not require registration, need not be filed pursuant to Section 4(b) of the Act.

VI-EXECUTION

In accordance with 28 U.S.C. § 1746, the undersigned swear(s) or affirm(s) under penalty of perjury that he/she has (they have) read the information set forth in this registration statement and the attached exhibits and that he/she is (they are) familiar with the contents thereof and that such contents are in their entirety true and accurate to the best of his/her (their) knowledge and belief, except that the undersigned make(s) no representation as to truth or accuracy of the information contained in the attached Short Form Registration Statement(s), if any, insofar as such information is not within his/her (their) personal knowledge.

(Date of signature)

7/7/98

(Type or print name under each signature¹³)
Peter J. KADZIK

¹³ This statement shall be signed by the individual agent, if the registrant is an individual, or by a majority of those partners, officers, directors or persons performing similar functions, if the registrant is an organization, except that the organization can, by power of attorney, authorize one or more individuals to execute this statement on its behalf.

UNITED STATES DEPARTMENT OF JUSTICE
FARA REGISTRATION UNIT
CRIMINAL DIVISION
WASHINGTON, D.C. 20530

NOTICE

Please answer the following questions and return this sheet in triplicate with your Supplemental Statement:

1. Is your answer to Item 16 of Section V (Informational Materials - page 8 of Form CRM-154, formerly Form OBD-64-Supplemental Statement):

YES _____ or NO X _____

(If your answer to question 1 is "yes" do not answer question 2 of this form.)

2. Do you disseminate any material in connection with your registration:

YES _____ or NO X _____

(If your answer to question 2 is "yes" please forward for our review copies of all material including: films, film catalogs, posters, brochures, press releases, etc. which you have disseminated during the past six months.)


Signature

7/7/98
Date

1998 JUL -3 PM 4:09
FARA REGISTRATION UNIT

Peter J. Kadzik

Please type or print name of
signatory on the line above

Partner
Title

DICKSTEIN SHAPIRO MORIN AND OSHINSKY L.L.P.
REGISTRATION NO. 3028
Attachment No. 1

Reporting Period December 1, 1997 – June 1, 1998

4 (b). Have any persons become partners, officers, directors or similar officials during this six-month reporting period?

Yes X No _____

If Yes, furnish the following information:

<u>Name</u>	<u>Resident Address</u>	<u>Citizenship</u>	<u>Position</u>	<u>Date Assumed</u>
Deborah Kelly	Chevy Chase, MD	Yes	Partner	01/01/1998
Kent Withycomb	Arlington, VA	Yes	Partner	01/01/1998
Margaret Feinstein	McLean, VA	Yes	Partner	01/01/1998
David Killalea	Alexandria, VA	Yes	Partner	01/01/1998
Ken Morrow	Frederick, MD	Yes	Partner	01/01/1998
David Parker	Arlington, VA	Yes	Partner	02/01/1998
Charlie Pratt	New York, NY	Yes	Partner	02/01/1998

DICKSTEIN SHAPIRO MORIN & OSHINSKY L.L.P.
REGISTRATION NO. 3028
Attachment No. 2

Reporting Period December 1, 1997 - June 1, 1998

11. During this six-month reporting period, have you engaged in any activities for or rendered any service to any foreign principal named in Items 8, 9, and 10 of this statement?

Yes X No

If Yes, identify each such foreign principal and describe in full detail your activities and services:

The registrant has continued to advise the **Malaysian Palm Oil Council of America** in connection with potential state and federal food labeling and advertising requirements and developments in related proceedings of the Food and Drug Administration and other agents.

The registrant has continued to represent **Middle East Airlines** in proceedings before the Department of Transportation and to advise it concerning aviation matters relating to the U.S., including restrictions on ticketing and landing rights.

The registrant has continued to represent **Kuwait Airways** in matters before the Department of Transportation and to advise it concerning aviation matters relating to the U.S., including license and permit renewals.

The registrant has continued to represent **Royal Thai Embassy - Office of Commercial Affairs** in matters of advising the client regarding Legislative Branch and Executive Branch policy affecting Thai commerce.

DICKSTEIN SHAPIRO MORIN & OSHINSKY L.L.P.
REGISTRATION NO. 3028
Attachment No. 3

Reporting Period December 1, 1997 - June 1, 1998

14. (a) RECEIPTS - MONIES

During this six-month reporting period, have you received from any foreign principal named in items 8, 9, and 10 of this statement, or from any other source, for or in the interests of any such foreign principal, any contributions, income or money either as compensation or otherwise?

Yes X No

If Yes, set forth below in the required detail and separately for each foreign principal an account of such monies.

<u>Date</u>	<u>From Whom</u>	<u>Purpose</u>	<u>Amount</u>
12/15/97	Kuwait Airways	Compensation for legal services rendered and out of pocket expenses.	\$334.70
12/29/97	Kuwait Airways	Compensation for legal services rendered and out-of-pocket expenses.	47.50
02/03/98	Kuwait Airways	Compensation for legal services rendered and out-of-pocket expenses.	1,170.61
03/23/98	Kuwait Airways	Compensation for legal services rendered and out-of-pocket expenses.	403.51
12/24/97	Malaysian Palm Oil Council of America	Compensation for legal services rendered and out-of-pocket expenses.	1,410.92

01/13/98	Malaysian Palm Oil Council of America	Compensation for legal services rendered and out-of-pocket expenses.	3,103.20
04/20/98	Malaysian Palm Oil Council of America	Compensation for legal services rendered and out-of-pocket expenses.	15,209.25
04/30/98	Malaysian Palm Oil Council of America	Compensation for legal services rendered and out-of-pocket expenses.	7,487.71
12/17/97	Middle East Airlines	Compensation for legal services rendered and out-of-pocket expenses.	2,732.14
12/02/97	Royal Thai Embassy - Office of Commercial Affairs	Compensation for legal services rendered and out-of-pocket expenses.	6,191.75
01/29/98	Royal Thai Embassy - Office of Commercial Affairs	Compensation for legal services rendered and out-of-pocket expenses.	91.89
01/29/98	Royal Thai Embassy - Office of Commercial Affairs	Compensation for legal services rendered and out-of-pocket expenses.	108.68
03/18/98	Royal Thai Embassy - Office of Commercial Affairs	Compensation for legal services rendered and out-of-pocket expenses.	787.42
04/07/98	Royal Thai Embassy - Office of Commercial Affairs	Compensation for legal services rendered and out-of-pocket expenses.	586.27

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05/15/98	Royal Thai Embassy - Office of Commercial Affairs	Compensation for legal services rendered and out-of-pocket expenses.	644.36
Total expenses:			40,309.91

DICKSTEIN SHAPIRO MORIN & OSHINSKY L.L.P.
REGISTRATION NO. 3028
Attachment No. 4

Reporting Period December 1, 1997 - June 1, 1998

15. (a) DISBURSEMENTS - MONIES

During this six-month reporting period, have you
(1) disbursed or expended monies in connection with
activity on behalf of any foreign principal named in
Items 7, 8, and 9 of this statement?

Yes X No

(2) transmitted monies to any such foreign principal?

Yes X No

If Yes, set forth below in the required detail and separately
for each foreign principal any account of such monies,
including monies transmitted, if any, to each foreign
principal.

Malaysian Palm Oil Promotion

For expenses incurred 12/01/1997 through 06/01/1998 to DSMO:

Duplicating and Printing	307.35
Postage	4.79
Telephone	14.41
Filing	313.00
Commercial Printing	35.00
Lexis-Westlaw	68.16
Telecopier	223.50
Substitution-Publication	30.00
Online Database Search	51.41
Delivery-Courier	149.83
Document Services	85.74
Business Meals	94.14
 Total Expenses	 1,377.33

Middle East Airlines

For expenses incurred 12/01/1997 through 06/01/1998 to DSMO:

Duplicating and Printing	.90
Telephone	16.66
Total Expenses:	17.56

Kuwait Airways

For expenses incurred 12/01/1997 through 06/01/1998 to DSMO:

Duplicating and Printing	33.40
Telephone	13.88
Lexis-Westlaw	226.80
Telecopier	76.50
Delivery-Courier	44.18
Total Expenses:	394.76

Royal Thai Embassy

For expenses incurred 12/01/1997 through 06/01/1998 to DSMO:

Commercial Printing	6.35
Delivery-Courier	114.33
Duplicating and Printing	589.15
Lexis-Westlaw	1,402.62
Local Transportation	19.00
Online Database Search	323.40
Patents and Trademarks	46.00
Telecopier	657.00
Telephone	14.67
 Total Expenses	 3,172.52

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DICKSTEIN SHAPIRO MORIN AND OSHINSKY L.L.P.
REGISTRATION NO. 3028
Attachment No. 5

Reporting Period December 1, 1997 - June 1, 1998

15 (c). During this six month reporting period, have you from your own funds and on your own behalf either directly or through any other person, made any contributions of money or other things of value in connection with an election to any political office, or in connection with any primary election, convention, or caucus held to select candidates for political office?

Yes X No

Please see the attached Federal Election Commission Reports for the DSMO PAC. All contributions to political candidates and/or organizations are documented in Schedule B. Contributions on behalf of the DSMO PAC are recorded from December 1, 1997 through June 1, 1998.

**For Other Than An Authorized Committee
(Summary Page)**

4. TYPE OF REPORT

- (b) Is this Report an Amendment? ☐ YES ☒ NO

07/08/98

(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Dickstein Shapiro Morin & Oshinsky LLP PAC		REPORT COVERING PERIOD FROM 06/30/98 TO: 98	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	5425.00	5425.00	
ii. Unitemized			
iii. Total (add i and ii)	5425.00	5425.00	
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a iii, b and c)	5425.00	5425.00	
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	5425.00	5425.00	
20. Total Federal Receipts (subtract line 18 from line 19)	5425.00	5425.00	
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (Add a i, a ii, and b)			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees	18870.25	33570.25	
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (Add a, b and c)			
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	18870.25	33570.25	
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	18870.25	33570.25	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	5425.00	5425.00	
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)	5425.00	5425.00	
35. Total Federal Operating Expenditures (add 21 a i and 21 b)			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 1	OF 1
FOR LINE NUMBER 11ai		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code Rebecca L. Wright 2101 L. Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney Aggregate Year-To-Date \$ 875.00	Date (month, day, year) 04/21/98	Amount of Each Receipt this Period 875.00
B. Full Name, Mailing Address and ZIP Code Woody N. Peterson 2101 L. Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 787.50	Date (month, day, year) 04/21/98	Amount of Each Receipt this Period 787.50
C. Full Name, Mailing Address and ZIP Code Ira R. Mitzner 2101 L. Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 1137.50	Date (month, day, year) 04/28/98	Amount of Each Receipt this Period 1137.50
D. Full Name, Mailing Address and ZIP Code Patrick W. Lynch 2101 L. Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLPP Occupation Attorney Aggregate Year-To-Date \$ 350.00	Date (month, day, year) 04/27/98	Amount of Each Receipt this Period 350.00
E. Full Name, Mailing Address and ZIP Code Paul B. Bran 2101 L. Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 525.00	Date (month, day, year) 05/17/98	Amount of Each Receipt this Period 525.00
F. Full Name, Mailing Address and ZIP Code Andrew P. Miller 2101 L. Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 1750.00	Date (month, day, year) 05/16/98	Amount of Each Receipt this Period 1750.00
G. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	5425.00
TOTAL This Period (last page this line number only)	5425.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 1 OF 2
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Porter for Congress P.O. Box 7126 Deerfield, IL 60015-28359	General Election Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/13/98	500.00
B. Full Name, Mailing Address and ZIP Code McIntyre for Congress P.O. Box 1 Lumberton, NC 28359	Purpose of Disbursement Primary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/13/98	500.00
C. Full Name, Mailing Address and ZIP Code New Republican Majority Fund 900 Second Street, NE #114 Washington, DC 20002	Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) PAC	04/21/98	5000.00
D. Full Name, Mailing Address and ZIP Code Friends of Conrad Burns P.O. Box 1532 Billings, Montana 59103	Purpose of Disbursement Primary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Yr. 2000	04/30/98	1000.00
E. Full Name, Mailing Address and ZIP Code The Adam Smith PAC P.O. Box 2392 Tampa, FL 33601-2392	Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) PAC	05/04/98	1000.00
F. Full Name, Mailing Address and ZIP Code Baker for Congress P.O. Box 1694 Baton Rouge, LA 70821	Purpose of Disbursement Primary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/13/98	1000.00
G. Full Name, Mailing Address and ZIP Code Norwood for Congress P.O. Box 499 Evans, GA 30809	Purpose of Disbursement Primary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/09/98	500.00
H. Full Name, Mailing Address and ZIP Code Gregg for U.S. Senate P.O. Box 1812 Concord, NH 03302	Purpose of Disbursement Primary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	1000.00
I. Full Name, Mailing Address and ZIP Code 1998 Republican House-Senate Dinner 425 Second Street, NE Washington, DC 20002	Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) election	06/16/98	5000.00
SUBTOTAL of Disbursements This Page (optional)			15500.00
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of Detailed Summary Page	PAGE 2 OF 2
FOR LINE NUMBER 23	

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Etheridge for Congress P.O. Box 27646 Raleigh, NC 27611	General Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	500.00
B. Full Name, Mailing Address and ZIP Code Daniel K. Inouye in '98 1429 G Street, NW Suite 243 Washington, DC 20005	Primary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/24/98	1000.00
C. Full Name, Mailing Address and ZIP Code Mikulski for U.S. Senate P.O. Box 13147 Balitmore, MD 21203	in kind contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) fundraise	06/30/98	870.25
D. Full Name, Mailing Address and ZIP Code Mikulski for U.S. Senate P.O. Box 13147 Balitmore, MD 21203	Primary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/98	1000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

3370.25

TOTAL This Period (last page this line number only)

18870.25

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Dickstein Shapiro Morin & Oshinsky LLP PAC		2. FEC IDENTIFICATION NUMBER C00110197
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2101 L Street, NW		
CITY, STATE and ZIP CODE Washington, DC 20037		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☒ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20

☐ June 20

☐ October 20

☐ March 20

☐ July 20

☐ November 20

☐ April 20

☐ August 20

☐ December 20

☐ May 20

☐ September 20

☐ January 31

☐ Twelfth day report preceding _____
(Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on

_____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY

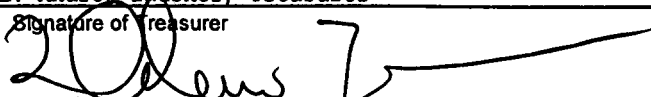
5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
07/01/97 through 12/31/97		
6. (a) Cash on Hand January 1, 1997		\$ 5003.81
(b) Cash on Hand at Beginning of Reporting Period	\$ 17313.31	
(c) Total Receipts (from line 19)	\$ 35908.00	\$ 70717.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 53221.31	\$ 75721.31
7. Total Disbursements (from Line 30)	\$ 24075.00	\$ 46575.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 29146.31	\$ 29146.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commis: 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

L. Andrew Zausner, Treasurer

Signature of Treasurer



Date

1/3/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM

(revised 9/96)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE Dickstein Shapiro Morin & Oshinsky LLP PAC		REPORT COVERING PERIOD FROM: 07/01/97 TO: 12/31/97	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		35908.00	70717.50
ii. Unitemized			
iii. Total (add i and ii)		35908.00	70717.50
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a iii, b and c)		35908.00	70717.50
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)		35908.00	70717.50
20. Total Federal Receipts (subtract line 18 from line 19)		35908.00	70717.50
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures		-0-	-0-
c. Total Operating Expenditures (Add a i, a ii, and b)		-0-	-0-
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		23000.00	45500.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees		275.00	275.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (Add a, b and c)		275.00	275.00
29. Other Disbursements		800.00	800.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)		24075.00	46575.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30)		24075.00	46575.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		35908.00	70717.50
33. Total Contribution Refunds (from line 28d)		275.00	275.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		35633.00	70442.50
35. Total Federal Operating Expenditures (add 21 a i and 21 b)		-0-	-0-
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35)		-0-	-0-

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 1 OF 9
FOR LINE NUMBER 11ai	

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code Lee A. Alexander 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney Aggregate Year-To-Date \$ 500.00	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and ZIP Code George T. Boggs 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 700.00	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 350.00
C. Full Name, Mailing Address and ZIP Code Henry C. Cashen, II 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 1400.00	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 350.00
D. Full Name, Mailing Address and ZIP Code Leslie R. Cohen 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 500.00	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Howard N. Feldman 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 340.00	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 136.00
F. Full Name, Mailing Address and ZIP Code Robert J. Higgins 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 1358.00	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 544.00
G. Full Name, Mailing Address and ZIP Code Gary M. Hoffman 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 1526.00	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 763.00

SUBTOTAL of Receipts This Page (optional)	2593.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 2	OF 9
	FOR LINE NUMBER 11ai	

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code Peter H. Jost 2101 L Street, NW Washington, DC 20037	Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 300.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 600.00		
B. Full Name, Mailing Address and ZIP Code Daniel M. Litt 2101 L Street, NW Washington, NW 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code Matthew G. Maloney 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 321.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 642.00		
D. Full Name, Mailing Address and ZIP Code Kenneth M. Simon 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 07/09/97	Amount of Each Receipt this Period 490.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 1225.00		
E. Full Name, Mailing Address and ZIP Code Lee A. Alexander 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 200.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 700.00		
F. Full Name, Mailing Address and ZIP Code George T. Boggs 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 350.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 1050.00		
G. Full Name, Mailing Address and ZIP Code Leslie R. Cohen 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 288.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 788.00		

SUBTOTAL of Receipts This Page (optional)	2449.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE	OF
	3	9
	FOR LINE NUMBER	
11ai		

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code Howard N. Feldman 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney Aggregate Year-To-Date \$ 476.00	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 136.00
B. Full Name, Mailing Address and ZIP Code Robert J. Higgins 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 1902.00	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 544.00
C. Full Name, Mailing Address and ZIP Code Gary M. Hoffman 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 2188.00	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 662.00
D. Full Name, Mailing Address and ZIP Code Peter H. Jost 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 875.00	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 275.00
E. Full Name, Mailing Address and ZIP Code Daniel M. Litt 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 1500.00	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Matthew G. Maloney 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 963.00	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 321.00
G. Full Name, Mailing Address and ZIP Code Kenneth M. Simon 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$ 1715.00	Date (month, day, year) 07/18/97	Amount of Each Receipt this Period 490.00

SUBTOTAL of Receipts This Page (optional) 2928.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4	OF 9
FOR LINE NUMBER 11ai		

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code Lee A. Alexander 2101 L Street, NW Washington, DC 20037	Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 263.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 963.00		
B. Full Name, Mailing Address and ZIP Code Howard N. Feldman 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 137.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 613.00		
C. Full Name, Mailing Address and ZIP Code Robert J. Higgins 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 818.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 2720.00		
D. Full Name, Mailing Address and ZIP Code Peter H. Jost 2101 L Street, NW Washington, DC 20037	Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 275.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 1150.00		
E. Full Name, Mailing Address and ZIP Code Richard J. Leveridge 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 613.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 613.00		
F. Full Name, Mailing Address and ZIP Code Daniel M. Litt 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 163.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 1663.00		
G. Full Name, Mailing Address and ZIP Code Bernard Nash 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 1925.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 1925.00		

SUBTOTAL of Receipts This Page (optional) 4194.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 5	OF 9
FOR LINE NUMBER 11ai		

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code Kenneth M. Simon 2101 L Street, NW Washington, DC 20037	Name of Employer Dickstein Shapiro Morin & Oshinsky LLP "DSMOLLP" Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 735.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 2450.00		
B. Full Name, Mailing Address and ZIP Code Paul Taskier 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 09/18/97	Amount of Each Receipt this Period 700.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 700.00		
C. Full Name, Mailing Address and ZIP Code Donald Gregory 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 11/03/97	Amount of Each Receipt this Period 613.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$		
D. Full Name, Mailing Address and ZIP Code William Rosen 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 12/16/97	Amount of Each Receipt this Period 438.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$		
E. Full Name, Mailing Address and ZIP Code Andrew Miller 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 12/16/97	Amount of Each Receipt this Period 750.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$		
F. Full Name, Mailing Address and ZIP Code Emanuel Faust, Jr. 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 12/16/97	Amount of Each Receipt this Period 613.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 950.50		
G. Full Name, Mailing Address and ZIP Code Sidney Dickstein 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney	Date (month, day, year) 12/16/97	Amount of Each Receipt this Period 800.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 1663.00		

SUBTOTAL of Receipts This Page (optional)	4649.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 6	OF 9
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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code James Brady 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 350.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Thomas D'Amico 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 350.50
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Thomas D'Amico 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 2735.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Thomas D'Amico 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 997.50
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Lawrence Garr 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 613.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Allan Goldstein 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 613.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Neil Lefkowitz 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 613.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 6272.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 7	OF 9
FOR LINE NUMBER 11ai		

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NAME OF COMMITTEE (in Full) Dickstein Shapiro Morin & Oshinsky LLP PAC		FEC ID No. C00110197	
A. Full Name, Mailing Address and ZIP Code Peter Morgan 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 900.00
B. Full Name, Mailing Address and ZIP Code Kenneth Adams 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 900.00
C. Full Name, Mailing Address and ZIP Code Thomas Mack 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 263.00
D. Full Name, Mailing Address and ZIP Code Frank Razzano 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 788.00
E. Full Name, Mailing Address and ZIP Code Stephen Dvorkin 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 613.00
F. Full Name, Mailing Address and ZIP Code Karen Bush 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 263.00
G. Full Name, Mailing Address and ZIP Code David Elkind 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 306.50
SUBTOTAL of Receipts This Page (optional)			4033.50
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 8	OF 9
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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code Barry Fleishman 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 306.50
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Leon Kellner 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 1750.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Mark Kolman 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 788.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Elizabeth Sherwin 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 613.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Kenneth Simon 2101 L Street NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 862.50
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3312.50		
F. Full Name, Mailing Address and ZIP Code Seymour Glanzer 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 1837.50
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Timothy Hutchens 2101 L Street, NW Washington, DC 20037	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 957.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 7114.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 9	OF 9
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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

FEC ID No. C00110197

A. Full Name, Mailing Address and ZIP Code Barry Levine 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 1337.50
B. Full Name, Mailing Address and ZIP Code Mark Packman 2101 L Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DSMOLLP Occupation Attorney Aggregate Year-To-Date \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 337.50
C. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	1675.00
TOTAL This Period (last page this line number only)	35908.0

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page	PAGE 1 OF 4
FOR LINE NUMBER 23	

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

A. Full Name, Mailing Address and ZIP Code Daniel K. Inouye - Campaign 1429 G. Street, NW, Ste 243 Washington, DC 20005	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 07/15/97	Amount of Each Disbursement This Period 1000.00
B. Full Name, Mailing Address and ZIP Code Montanians for Rick Hill P.O. Box 1256 Helena, MT 59624	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 07/15/97	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Friends of John Tanner 5501 Cherokee Ave, Suite 112 Alexandria, VA 22313	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 07/23/97	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code Schaefer to Congress c/o Lynne H. Church 1401 H Street, NW, Ste. 760 Washington, DC 20005	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 07/29/97	Amount of Each Disbursement This Period 250.00
E. Full Name, Mailing Address and ZIP Code Evan Bayh Committee P.O. Box 3366 Indianapolis, IN 46208	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 08/01/97	Amount of Each Disbursement This Period 1000.00
F. Full Name, Mailing Address and ZIP Code Henry Hyde for Congress Committee P.O. Box 332 Des Plaines, IL 60016	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/08/97	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code Bill Thomas Campaign Committee ID # C00100537 Bakersfield, CA 93302	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/12/97	Amount of Each Disbursement This Period 1000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

4750.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page	PAGE 2	OF 4
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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

A. Full Name, Mailing Address and ZIP Code Norwood for Congress P.O. Box 499 Evans, GA 30809	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/12/97	Amount of Each Disbursement This Period 500.00
B. Full Name, Mailing Address and ZIP Code Coble for Congress 4451 Brookfield Corporate Dr Suite 200 Chantilly, VA 20151-1652	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/12/97	Amount of Each Disbursement This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Re-Elect Brian Bilbray for Congress 4451 Brookfield Corp. Dr. Chantilly, VA 20151-1652	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/12/97	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code Snowbarger for Congress P.O. Box 3001 Olathe, KS 66063	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/24/97	Amount of Each Disbursement This Period 500.00
E. Full Name, Mailing Address and ZIP Code "A Lot of People Supporting Tom Daschle" c/o Jenny Lee 3900 Wisconsin Ave, NW Washington, DC 20016	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/24/97	Amount of Each Disbursement This Period 1000.00
F. Full Name, Mailing Address and ZIP Code John Spratt for Congress P.O. Box 2884 Washington, DC 20013	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/24/97	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code Tom Davis for Congress P.O. Box 483 Dunn Loring, VA 22037	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/24/97	Amount of Each Disbursement This Period 1000.00
H. Full Name, Mailing Address and ZIP Code Friends of Roger Wicker 1031 South 18th Street Arlington, VA 22202	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/25/97	Amount of Each Disbursement This Period 1000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

A. Full Name, Mailing Address and ZIP Code Congressman Bob Clement Committee 998 North Royal Street Alexandria, VA 22314	Purpose of Disbursement Primary Election	Date (month, day, year) 10/07/97	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
B. Full Name, Mailing Address and ZIP Code Bob Etheridge for Congress Committee P.O. Box 27646 Raleigh, NC 27611	Purpose of Disbursement Primary Election	Date (month, day, year) 10/07/97	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code Campbell Victory Fund 236 Massachusetts Ave., NE Ste. 503 Washington, DC 20002	Purpose of Disbursement Primary Election	Date (month, day, year) 10/20/97	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code Mikulski for Senate Fannie Mae 3900 Wisconsin Ave., NW Washington, DC 20016	Purpose of Disbursement Primary Election	Date (month, day, year) 10/20/97	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code Virgil Goode for Congress P.O. Box 2884 Washington, DC 20013	Purpose of Disbursement Primary Election	Date (month, day, year) 10/20/97	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code Walter Jones for Congress c/o Greene & Associates P.O. Box 99667 Raleigh, NC 27624	Purpose of Disbursement Primary Election	Date (month, day, year) 10/20/97	Amount of Each Disbursement This Period 750.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code Friends of Connie Mack P.O. Box 2392 Tampa, FL 33601-2392	Purpose of Disbursement Primary Election	Date (month, day, year) 10/20/97	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code Bliley for Congress 30001 Park Center Drive Alexandria, VA 22302	Purpose of Disbursement Primary Election	Date (month, day, year) 10/20/97	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code Rogan Campaign Committee c/o Greene & Associates P.O. Box 846 Rancho Cucamonga, CA 91729	Purpose of Disbursement Primary Election	Date (month, day, year) 10/20/97	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	6750.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

A. Full Name, Mailing Address and ZIP Code Third Annual Majority Anniversary Dinner 425 2nd St., NW Washington, DC 20002	Purpose of Disbursement Contribution-1 ticket Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/04/97	Amount of Each Disbursement This Period 1500.00
B. Full Name, Mailing Address and ZIP Code Blagoevich for Congress c/o Robert M. Schute 1317 F Street, NW Ste. 800 Washington, DC 20004	Purpose of Disbursement Primary Election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year) 11/04/97	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Searchlight Leadership PAC c/o Bill Marion 245 2nd Street, NW Ste. 300 Washington, DC 20002	Purpose of Disbursement PAC Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/04/97	Amount of Each Disbursement This Period 2000.00
D. Full Name, Mailing Address and ZIP Code Friends of Senator D'Amato P.O. Box 888 Mineola, NY 11501	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/14/97	Amount of Each Disbursement This Period 1000.00
E. Full Name, Mailing Address and ZIP Code Whitfield for Congress P.O. Box 391 Hopkinsville, KY 42241	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/11/97	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	23000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
28a		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for other purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

A. Full Name, Mailing Address and ZIP Code Peter Jost 2101 L Street, NW Washington, DC 20037	Purpose of Disbursement Refund of Overpayment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year) 10/20/97	Amount of Each Disbursement This Period 275.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	275.00
TOTAL This Period (last page this line number only)	275.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin & Oshinsky LLP PAC

A. Full Name, Mailing Address and ZIP Code Capitol Hill Club 300 First Street, SE Washington, DC 20003	Purpose of Disbursement Club Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year) 07/11/97	Amount of Each Disbursement This Period 800.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	800.00
TOTAL This Period (last page this line number only)	800.00

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

HAND DELIVERED

FEDERAL ELECTION COMMISSION
REPORTS ANALYSIS DIVISION

APR 15 12 40 PM '98

1. NAME OF COMMITTEE (in full) Dickstein Shapiro Morin and Oshinsky PAC		2. FEC IDENTIFICATION NUMBER C00110197
ADDRESS (number and street) 2101 L Street, NW	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE and ZIP CODE Washington, DC 20037		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20

☐ June 20

☐ October 20

☐ March 20

☐ July 20

☐ November 20

☐ April 20

☐ August 20

☐ December 20

☐ May 20

☐ September 20

☐ January 31

☐ Twelfth day report preceding

(Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on

_____ in the State of _____

(b) Is this Report an Amendment?

☐ YES

☒ NO

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
01/01/98 through 03/31/98		
6. (a) Cash on Hand January 1, 1998		\$ 29134.31
(b) Cash on Hand at Beginning of Reporting Period	\$ 29134.31	
(c) Total Receipts (from line 19)	\$	\$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 29134.31	\$ 29134.31
7. Total Disbursements (from Line 30)	\$ 14700.00	\$ 14700.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 14434.31	\$ 14434.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll-Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

L. Andrew Zausner

Signature of Treasurer

Date

4/15/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

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FEC FORM 3

(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE Dickstein Shapiro Morin and Oshinsky PAC		REPORT COVERING PERIOD FROM 03/31/98 TO: 98	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			
ii. Unitemized			
iii. Total (add i and ii)		0	
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a iii, b and c)		0	
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)		0	
20. Total Federal Receipts (subtract line 18 from line 19)		0	
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (Add a i, a ii, and b)		0	
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		14700.00	14700.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (Add a, b and c)		0	
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)		14700.00	14700.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30)		14700.00	14700.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)			
35. Total Federal Operating Expenditures (add 21 a i and 21 b)		0	
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35)		0	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 1 OF 2
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Dickstein Shapiro Morin and Oshinsky PAC

A. Full Name, Mailing Address and ZIP Code Tim Johnson for South Dakota 405 South Third Street Sioux Falls, SD 57104	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 2/12/98	Amount of Each Disbursement This Period 1000.00
B. Full Name, Mailing Address and ZIP Code Chris Gorman For Congress 661 South Hurstbourne Pkwy Second Floor Louisville, KY 40222	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 2/18/98	Amount of Each Disbursement This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Faircloth for Senate P.O. Box 26585 Raleigh, NC 27611	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/3/98	Amount of Each Disbursement This Period 1000.00
D. Full Name, Mailing Address and ZIP Code Friends of Bob Graham (Bob Graham for Senate) 233 Constitution Ave. NE Washington, DC 20022	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/3/98	Amount of Each Disbursement This Period 1000.00
E. Full Name, Mailing Address and ZIP Code Citizens for Kasich 2021 E.Dublin/Granville Rd. Suite 215 Columbus, Ohio 43229	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/4/98	Amount of Each Disbursement This Period 2500.00
F. Full Name, Mailing Address and ZIP Code John D. Dingell for Congress Committee P.O. Box 75214 Washington, DC 20013	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/4/98	Amount of Each Disbursement This Period 1000.00
G. Full Name, Mailing Address and ZIP Code Walter Jones for Congress Committee P.O. Box 99667 Raleigh, NC 27624	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/12/98	Amount of Each Disbursement This Period 500.00
H. Full Name, Mailing Address and ZIP Code McCain for Senate '98 Cmmt. 507 Capitol Court, NE, #100 Washington, DC 20002	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/17/98	Amount of Each Disbursement This Period 1000.00
I. Full Name, Mailing Address and ZIP Code Burr For Congress P.O. Box 5723 Winston-Salem, NC 27104	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/17/98	Amount of Each Disbursement This Period 2000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 2 OF 2
FOR LINE NUMBER 23	

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NAME OF COMMITTEE (In Full)

Dickstein Shapiro Morin and Oshinsky PAC

A. Full Name, Mailing Address and ZIP Code Coble for Congress c/o Morgan, Meredith and Assoc. 4451 Brookfield Corporate Dr Chantilly, VA 20151	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/17/98	Amount of Each Disbursement This Period 1000.00
B. Full Name, Mailing Address and ZIP Code Tom Delay Congressional Com. 10707 Corporate Drive Suite 130 Stafford, TX 77477	Purpose of Disbursement General Election Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/18/98	Amount of Each Disbursement This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Virgil Goode for Congress 115 Orchard Avenue Rocky Mount, VA 24151	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/25/98	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code Baesler for Senate Committee 426 C. Street, NE Washington, DC 20002	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/31/98	Amount of Each Disbursement This Period 200.00
E. Full Name, Mailing Address and ZIP Code (Tom) Udall For Us All P.O. Gox 208 Santa Fe, NM 87504	Purpose of Disbursement Primary Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/31/98	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code Phil Crane for Congress P.O. Box 8534 Rolling Meadows, IL 60008	Purpose of Disbursement General Election Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 3/31/98	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

3700.00

TOTAL This Period (last page this line number only)

14700.00